

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Nebraska Republican Party

ADDRESS (number and street)

1610 N Street

☐Check if different  
than previously  
reported. (ACC)

Lincoln

NE

68508

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00032334

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☒

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
Post -Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

01

01

2007

through

01

31

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Rodney Krogh

Signature of Treasurer

Electronically Filed by Rodney Krogh

Date

02

19

2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							
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**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Nebraska Republican Party

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	1	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	1	3	1	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2007</span>		45994.31
(b) Cash on Hand at Beginning of Reporting Period .....	45994.31	
(c) Total Receipts (from Line 19) .....	19378.83	19378.83
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	65373.14	65373.14
7. Total Disbursements (from Line 31) .....	26878.41	26878.41
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	38494.73	38494.73
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	4140.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	12486.08	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name  
Nebraska Republican Party

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	7350.00	7350.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	10305.00	10305.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤	17655.00	17655.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➤	17655.00	17655.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	1723.83	1723.83
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	1723.83	1723.83
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	19378.83	19378.83
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	17655.00	17655.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	969.65	969.65
(ii) Non-Federal Share.....	1723.82	1723.82
(b) Other Federal Operating Expenditures.....	15047.31	15047.31
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	17740.78	17740.78
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	9137.63	9137.63
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	9137.63	9137.63
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	26878.41	26878.41
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	25154.59	25154.59

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	17655.00	17655.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	17655.00	17655.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	16016.96	16016.96
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	16016.96	16016.96

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 33

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Nebraska Republican Party

**A.** Full Name (Last, First, Middle Initial)  
Susan Bazis

Mailing Address 4416 S 174 Avenue

City State Zip Code  
Omaha NE 68135

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bazis Law OfficesOccupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	8		2	0	0	7

Transaction ID: 70129.C167866

Amount of Each Receipt this Period

500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Naomi Brummond

Mailing Address Rt 1 Box 13

City State Zip Code  
Rosalie NE 68055

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HousewifeOccupation  
Housewife

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	8		2	0	0	7

Transaction ID: 70129.C167788

Amount of Each Receipt this Period

350.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Daniel Chesire

Mailing Address 14823 Z Circle

City State Zip Code  
Omaha NE 68137

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lamson Dugan & MurryOccupation  
Lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	6		2	0	0	7

Transaction ID: 70129.C167852

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

1100.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Nebraska Republican Party

**A.** Full Name (Last, First, Middle Initial)  
Douglas Dalke  
Mailing Address 7521 Union Hill Court

City State Zip Code  
Lincoln NE 68516

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 6 / 2 0 0 7

Transaction ID: 70129.C167858

Amount of Each Receipt this Period

250.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
The Honorable Hal Daub  
Mailing Address PO Box 241988

City State Zip Code  
Omaha NE 68124-6988

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blackwell Sanders Peper  
Martin

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 6 / 2 0 0 7

Transaction ID: 70129.C167849

Amount of Each Receipt this Period

500.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Judy Glassburner  
Mailing Address 1032 H Street

City State Zip Code  
Geneva NE 68361

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Farmers & Merchants Natl

Occupation  
Ag Loan Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 0 8 / 2 0 0 7

Transaction ID: 70129.C167794

Amount of Each Receipt this Period

250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Nebraska Republican Party

Full Name (Last, First, Middle Initial)

**A.** James & Teri Haga

Mailing Address 2951 Ranch Reserve Ln

City State Zip Code  
 Denver CO 80234-2685

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Hamilton College

Occupation  
Midwest Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 1 / 1 8 / 2 0 0 7

Transaction ID: 70129.C167869

Amount of Each Receipt this Period

500.00

Receipt

Full Name (Last, First, Middle Initial)

**B.** DR. John Haggstrom

Mailing Address 1125 S 94th St

City State Zip Code  
 Omaha NE 68124-1101

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 1 / 0 3 / 2 0 0 7

Transaction ID: 70129.C167741

Amount of Each Receipt this Period

500.00

Receipt

Full Name (Last, First, Middle Initial)

**C.** J. Terrence Haney

Mailing Address 407 North Elmwood Road

City State Zip Code  
 Omaha NE 68132

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Insurance Consultants

Occupation  
Insurance Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 1 / 2 2 / 2 0 0 7

Transaction ID: 70129.C167873

Amount of Each Receipt this Period

500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Nebraska Republican Party

A. Full Name (Last, First, Middle Initial)

Mark Koller

Mailing Address 6924 Berrywood Ct

City State Zip Code  
 Lincoln NE 68516-2445

FEC ID number of contributing federal political committee.

C

Name of Employer  
HR ConnexOccupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 1 / 1 0 / 2 0 0 7

Transaction ID: 70129.C167812

Amount of Each Receipt this Period

500.00

Receipt

B. Full Name (Last, First, Middle Initial)

DR. James McClurg

Mailing Address 2030 Surfside Drive

City State Zip Code  
 Lincoln NE 68528

FEC ID number of contributing federal political committee.

C

Name of Employer  
MDS Pharma ServicesOccupation  
Businessman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 1 / 0 3 / 2 0 0 7

Transaction ID: 70129.C167719

Amount of Each Receipt this Period

500.00

Receipt

C. Full Name (Last, First, Middle Initial)

Michael Meyer

Mailing Address 9909 Broadmoor Road

City State Zip Code  
 Omaha NE 68114

FEC ID number of contributing federal political committee.

C

Name of Employer  
Tenaska, Inc.Occupation  
Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 1 / 0 5 / 2 0 0 7

Transaction ID: 70129.C167755

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

2000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Nebraska Republican Party

**A.** Full Name (Last, First, Middle Initial)  
 Connie and H. Don Osborne  
 Mailing Address 5204 Izard Street

City State Zip Code  
 Omaha NE 68132

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Houchen Bindery

Occupation  
 Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 1 / 1 0 / 2 0 0 7

Transaction ID: 70129.C167837

Amount of Each Receipt this Period

250.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
 Pat & Mary Ratigan  
 Mailing Address 668 East Dorsey Road

City State Zip Code  
 Beatrice NE 68310-9445

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Ratigan - Sehottler

Occupation  
 President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 1 / 0 3 / 2 0 0 7

Transaction ID: 70129.C167828

Amount of Each Receipt this Period

250.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
 Ransom Roman  
 Mailing Address PO Box 1103

City State Zip Code  
 Norfolk NE 68701

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Self

Occupation  
 Real Estate Appraiser

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 1 / 0 3 / 2 0 0 7

Transaction ID: 70129.C167731

Amount of Each Receipt this Period

250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Nebraska Republican Party

A. Full Name (Last, First, Middle Initial)

Joyce Simmons

Mailing Address 220 N Hall

City State Zip Code  
 Valentine NE 69201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Orthodontist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 1 / 0 8 / 2 0 0 7

Transaction ID: 70129.C167776

Amount of Each Receipt this Period

250.00

Receipt

B. Full Name (Last, First, Middle Initial)

Darlene Starman

Mailing Address 1030 Rockhurst Drive

City State Zip Code  
 Lincoln NE 68510

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Woods Bros. Realty

Occupation  
Realtor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 1 / 0 3 / 2 0 0 7

Transaction ID: 70129.C167720

Amount of Each Receipt this Period

250.00

Receipt

C. Full Name (Last, First, Middle Initial)

Elroy Thiesen

Mailing Address 87738 489th Avenue

City State Zip Code  
 Oneill NE 68763

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Farmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 1 / 1 6 / 2 0 0 7

Transaction ID: 70129.C167856

Amount of Each Receipt this Period

500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

7350.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 33

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Nebraska Republican Party

Full Name (Last, First, Middle Initial)

## **A. American Medical Security**

Mailing Address PO Box 9001004

City Louisville State KY Zip Code 40290-

Purpose of Disbursement  
Medical/Dental Premiums

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 70219.E10398

Date of Disbursement

01 / 03 / 2007

Amount of Each Disbursement this Period

2440.86

MEDICAL/DENTAL PREMIUMS

## **B. De Carlson**

Mailing Address PO Box 100  
310 Harold St.

City Crofton State NE Zip Code 68730-

Purpose of Disbursement  
Travel Expense Reimbursement

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 70219.E10435

Date of Disbursement

01 / 06 / 2007

Amount of Each Disbursement this Period

1904.56

TRAVEL EXPENSE REIMBURSEMENT

## **C. Tiffany Carlton**

Mailing Address 2840 S 33rd St

City Lincoln State NE Zip Code 68506-3203

Purpose of Disbursement  
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 70219.E10438

Date of Disbursement

01 / 09 / 2007

Amount of Each Disbursement this Period

117.73

REIMBURSEMENT: SEE BELOW

**SUBTOTAL** of Disbursements This Page (optional) .....

4463.15

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 33

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Nebraska Republican Party

Full Name (Last, First, Middle Initial)

**A.** Tiffany Carlton

Mailing Address 2840 S 33rd St

City Lincoln State NE Zip Code 68506-3203

Purpose of Disbursement

Mileage Reimbursement

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 70219.E10437

Date of Disbursement

01 / 09 / 2007

Amount of Each Disbursement this Period

216.00

MILEAGE REIMBURSEMENT

Full Name (Last, First, Middle Initial)

**B.** Feather, Larson, Synhorst

Mailing Address 7320 N. Dreamy Draw Drive

City Phoenix State AZ Zip Code 85020-

Purpose of Disbursement

Telemarketing - NEGOP

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 70219.E10409

Date of Disbursement

01 / 22 / 2007

Amount of Each Disbursement this Period

3978.00

TELEMARKETING - NEGOP

Full Name (Last, First, Middle Initial)

**C.** Jessica Moenning

Mailing Address 3515 B Street

City Lincoln State NE Zip Code 68510-

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 70219.E10408

Date of Disbursement

01 / 16 / 2007

Amount of Each Disbursement this Period

2500.00

FUNDRAISING CONSULTING

**SUBTOTAL** of Disbursements This Page (optional) .....

6694.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 33

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Nebraska Republican Party

Full Name (Last, First, Middle Initial)

## **A. Southwest Publishing**

Mailing Address 2600 NW Topeka Avenue

City Topeka State KS Zip Code 66617-

Purpose of Disbursement  
POSTAGE - NEGOP FUNDRAISING MAIL EX

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70219.E10410

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2543.77

POSTAGE - NEGOP FUNDRAISING MAIL EX

Full Name (Last, First, Middle Initial)

## **B. US Postmaster**

Mailing Address 700 R Street

City Lincoln State NE Zip Code 68501-

Purpose of Disbursement  
POSTAGE - NEGOP FUNDRAISING MAIL EX

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70219.E10420

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

POSTAGE - NEGOP FUNDRAISING MAIL EX

Full Name (Last, First, Middle Initial)

## **C. Wells Fargo Card Services**

Mailing Address PO Box 6426

City Carol Stream State IL Zip Code 60197-

Purpose of Disbursement  
CREDIT CARD: SEE BELOW

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 70219.E10442

Date of Disbursement

/   /

Amount of Each Disbursement this Period

703.20

CREDIT CARD: SEE BELOW

**SUBTOTAL** of Disbursements This Page (optional) .....

3746.97

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 33

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Nebraska Republican Party

Full Name (Last, First, Middle Initial)

## **A. Midwest Express Airlines**

Mailing Address 4501 Abbott Drive

City OMAHA State NE Zip Code 68112-

Purpose of Disbursement  
MEMO Travel Expense

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 70219.E10449

Date of Disbursement

01 / 11 / 2007

Amount of Each Disbursement this Period

185.10

### **[MEMO ITEM]**

MEMO: MEMO TRAVEL EXPEN-  
SE

Full Name (Last, First, Middle Initial)

## **B. Republican National Committee**

Mailing Address 310 First Street Southeast

City Washington State DC Zip Code 20003-

Purpose of Disbursement  
MEMO REGISTRATION FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 70219.E10448

Date of Disbursement

01 / 11 / 2007

Amount of Each Disbursement this Period

95.00

### **[MEMO ITEM]**

MEMO: MEMO REGISTRATION  
FEES

Full Name (Last, First, Middle Initial)

## **C. US Airways**

Mailing Address 4000 E Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034-3802

Purpose of Disbursement  
MEMO Travel Expense

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 70219.E10450

Date of Disbursement

01 / 11 / 2007

Amount of Each Disbursement this Period

423.10

### **[MEMO ITEM]**

MEMO: MEMO TRAVEL EXPEN-  
SE

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

14904.12

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 16 / 33

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Nebraska Republican Party

<b>A.</b> Full Name (Last, First, Middle Initial) Tiffany Carlton		<b>Transaction ID:</b> 70219.E10457 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 5 / 2 0 0 7</div> </div>
Mailing Address 2840 S 33rd St		Amount of Each Disbursement this Period <div>1756.54</div>
City Lincoln State NE Zip Code 68506-3203		
Purpose of Disbursement FEA STAFF SALARY	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA STAFF SALARY
<b>B.</b> Full Name (Last, First, Middle Initial) Tiffany Carlton		<b>Transaction ID:</b> 70219.E10458 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 3 1 / 2 0 0 7</div> </div>
Mailing Address 2840 S 33rd St		Amount of Each Disbursement this Period <div>1756.54</div>
City Lincoln State NE Zip Code 68506-3203		
Purpose of Disbursement FEA STAFF SALARY	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA STAFF SALARY
<b>C.</b> Full Name (Last, First, Middle Initial) Stacey Dieckmann		<b>Transaction ID:</b> 70219.E10459 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 5 / 2 0 0 7</div> </div>
Mailing Address 4210 G St		Amount of Each Disbursement this Period <div>1212.70</div>
City Lincoln State NE Zip Code 68510-4734		
Purpose of Disbursement FEA STAFF SALARY	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEA STAFF SALARY
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>4725.78</div>
<b>TOTAL</b> This Period (last page this line number only) .....		



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 17 / 33

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Nebraska Republican Party

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Stacey Dieckmann</b>		<b>Transaction ID:</b> 70219.E10460 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 3 1 / 2 0 0 7</div> </div>	
Mailing Address 4210 G St		Amount of Each Disbursement this Period <div>1212.70</div>	
City Lincoln State NE Zip Code 68510-4734	Purpose of Disbursement FEA STAFF SALARY	<input type="checkbox"/> Category/ Type	FEA STAFF SALARY
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) <b>INTERNAL REVENUE SERVICE</b>		<b>Transaction ID:</b> 70129.E10357 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 8 / 2 0 0 7</div> </div>	
Mailing Address OGDEN, UTAH		Amount of Each Disbursement this Period <div>1312.38</div>	
City OGDEN State UT Zip Code 84201-	Purpose of Disbursement FEA STAFF PAYROLL TAXES	<input type="checkbox"/> Category/ Type	FEA STAFF PAYROLL TAXES
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) <b>INTERNAL REVENUE SERVICE</b>		<b>Transaction ID:</b> 70219.E10468 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 9 / 2 0 0 7</div> </div>	
Mailing Address OGDEN, UTAH		Amount of Each Disbursement this Period <div>1300.17</div>	
City OGDEN State UT Zip Code 84201-	Purpose of Disbursement FEA STAFF PAYROLL TAXES	<input type="checkbox"/> Category/ Type	FEA STAFF PAYROLL TAXES
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**3825.25**

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 18 / 33

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Nebraska Republican Party

Full Name (Last, First, Middle Initial)

**A. NEBRASKA DEPT OF REVENUE**

Mailing Address 301 CENTENNIAL MALL SOUTH

City  
LINCOLN

State  
NE

Zip Code  
68508-

Purpose of Disbursement  
FEA STAFF PAYROLL TAXES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 70219.E10418

Date of Disbursement

/   /

Amount of Each Disbursement this Period

586.60

FEA STAFF PAYROLL TAXES

**SUBTOTAL** of Disbursements This Page (optional) .....

586.60

**TOTAL** This Period (last page this line number only) .....

9137.63

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 19 / 33

FOR LINE NUMBER:  
(check only one)☒ 9  
☐ 10NAME OF COMMITTEE (In Full)  
Nebraska Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Friends of Senator Dave Karnes

Nature of Debt (Purpose):

Mailing Address 625 N. 129th Plaza

City State ZIP Code  
Omaha NE 68154-

Outstanding Balance Beginning This Period

4140.00

Transaction ID: LS

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4140.00

1) **SUBTOTALS** This Period This Page (optional)..... ▶

4140.00

2) **TOTALS** This Period (last page this line number only)..... ▶

4140.00

3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 20 / 33

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Nebraska Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
The Honorable Chuck SigersonNature of Debt (Purpose):  
Travel Expenses

Mailing Address 15835 California Street

City State ZIP Code  
Omaha NE 68118-

Outstanding Balance Beginning This Period

831.75

Transaction ID: LS0128200457E6217

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

831.75

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Strategic Staff Management, IncNature of Debt (Purpose):  
Payroll-Labels-Company Bankrupt

Mailing Address 202 S. 71st Street

City State ZIP Code  
Omaha NE 68132-

Outstanding Balance Beginning This Period

11654.33

Transaction ID: LS0128200457E6218

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11654.33

1) **SUBTOTALS** This Period This Page (optional).....

12486.08

2) **TOTALS** This Period (last page this line number only).....

12486.08

3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 21 / 33  
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Nebraska Republican Party

NAME OF ACCOUNT  
 Non-Federal Account  
 1610 N Street

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 1 / 0 9 / 2 0 0 7

TOTAL AMOUNT TRANSFERRED

115.20

BREAKDOWN OF TRANSFER RECEIVED

i) **Total Administrative** .....

115.20

Transaction ID: H370219.C167933

ii) **Generic Voter Drive** .....

Transaction ID:

iii) **Exempt Activities** .....

Transaction ID:

iv) **Direct Fundraising** (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) **Direct Candidate Support** (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) **Public Communications Referring Only to Party** (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

**TOTAL** This Period (Administrative) .....

**TOTAL** This Period (Generic Voter Drive) .....

**TOTAL** This Period (Exempt Activities) .....

**TOTAL** This Period (Direct Fundraising) .....

**TOTAL** This Period (Direct Candidate Support) .....

**TOTAL** This Period (Public Communications Referring Only to Party) .....

**TOTAL** This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 22 / 33  
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Nebraska Republican Party

NAME OF ACCOUNT  
 Non-Federal Account  
 1610 N Street

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 1 / 1 5 / 2 0 0 7

TOTAL AMOUNT TRANSFERRED

484.60

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

484.60

Transaction ID: H370219.C167932

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 23 / 33  
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Nebraska Republican Party

NAME OF ACCOUNT  
 Non-Federal Account  
 1610 N Street

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 1 / 2 9 / 2 0 0 7

TOTAL AMOUNT TRANSFERRED

775.39

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

775.39

Transaction ID: H370219.C167931

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 24 / 33  
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Nebraska Republican Party

NAME OF ACCOUNT  
 Non-Federal Account  
 1610 N Street

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 1 / 3 1 / 2 0 0 7

TOTAL AMOUNT TRANSFERRED

348.64

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

348.64

Transaction ID: H370219.C167929

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

1723.83

TOTAL This Period (Generic Voter Drive) .....

0.00

TOTAL This Period (Exempt Activities) .....

0.00

TOTAL This Period (Direct Fundraising) .....

0.00

TOTAL This Period (Direct Candidate Support) .....

0.00

TOTAL This Period (Public Communications Referring Only to Party) .....

0.00

TOTAL This Period (Total Amount Transferred) .....

1723.83



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 25 / 33  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Nebraska Republican Party

**A. Full Name (Last, First, Middle Initial)**  
Alltel

Mailing Address

1440 M St PO Box 81309

 City State Zip Code  
Lincoln NE 68501-

001

 Purpose of Disbursement:  
001 Utilities - Cellular
Category/  
Type
 Activity or Event Identifier:  
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

228.87

 Date  M  M /  D  D /  Y  Y  Y  Y  
 0 1 / 0 4 / 2 0 0 7

Transaction ID: H470129.E10341

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

64.80

115.20

180.00

**B. Full Name (Last, First, Middle Initial)**  
WELLS FARGO BANK NEBRASKA N.A.

Mailing Address

P.O. BOX 3408

 City State Zip Code  
OMAHA NE 68103-

001

 Purpose of Disbursement:  
001 Merchant Service Fees
Category/  
Type
 Activity or Event Identifier:  
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

48.87

 Date  M  M /  D  D /  Y  Y  Y  Y  
 0 1 / 0 3 / 2 0 0 7

Transaction ID: H470219.E10393

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

17.59

31.28

48.87

**C. Full Name (Last, First, Middle Initial)**  
UNION BANK

Mailing Address

PO BOX 82535

 City State Zip Code  
LINCOLN NE 68501-

001

 Purpose of Disbursement:  
001 Bank Service Charge
Category/  
Type
 Activity or Event Identifier:  
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2580.08

 Date  M  M /  D  D /  Y  Y  Y  Y  
 0 1 / 3 1 / 2 0 0 7

Transaction ID: H470219.E10396

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

24.24

43.08

67.32

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

106.63

189.56

296.19

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 26 / 33  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Nebraska Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 INTERNAL REVENUE SERVICE

Mailing Address

OGDEN, UTAH

City	State	Zip Code
OGDEN	UT	84201-

001

Purpose of Disbursement:  
 001 Unemployment Taxes

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2683.23

Date 01 / 31 / 2007

Transaction ID: H470219.E10399

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

37.13

66.02

103.15

**B. Full Name (Last, First, Middle Initial)**  
 Culligan Water

Mailing Address

1371 S 33rd St

City	State	Zip Code
Lincoln	NE	68510-4508

001

Purpose of Disbursement:  
 001 Bottled Water

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

729.82

Date 01 / 11 / 2007

Transaction ID: H470219.E10401

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

8.68

15.42

24.10

**C. Full Name (Last, First, Middle Initial)**  
 Hasler Financial

Mailing Address

PO Box 45850

City	State	Zip Code
San Francisco	CA	94145-

001

Purpose of Disbursement:  
 001 Postage Meter Lease

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

986.06

Date 01 / 11 / 2007

Transaction ID: H470219.E10402

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

63.94

113.68

177.62

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

109.75

195.12

304.87

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 27 / 33

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Nebraska Republican Party

**A. Full Name (Last, First, Middle Initial)**  
Lincoln Water System

Mailing Address

City County Building

City	State	Zip Code
Lincoln	NE	68508-

001

 Purpose of Disbursement:  
001 Utilities - Water
Category/  
Type
 Activity or Event Identifier:  
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

808.44

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	1	/	2	0	0	7

Transaction ID: H470219.E10403

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

28.30

50.32

78.62

**B. Full Name (Last, First, Middle Initial)**  
MCI WORLDCOM

Mailing Address

P.O. Box 856053

City	State	Zip Code
Louisville	KY	40285-

001

 Purpose of Disbursement:  
001 Long Distance
Category/  
Type
 Activity or Event Identifier:  
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

519.40

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	1	/	2	0	0	7

Transaction ID: H470219.E10404

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

51.94

92.34

144.28

**C. Full Name (Last, First, Middle Initial)**  
Office Depot

Mailing Address

333 N 50th Street

City	State	Zip Code
Lincoln	NE	68504-

001

 Purpose of Disbursement:  
001 Office Supplies
Category/  
Type
 Activity or Event Identifier:  
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

375.12

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	1	/	2	0	0	7

Transaction ID: H470219.E10405

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

52.65

93.60

146.25

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

132.89

236.26

369.15

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 28 / 33  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Nebraska Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 RDW Business Services, Inc.

Mailing Address

P.O. Box 22829

City State Zip Code  
 Lincoln NE 68542-

001

Purpose of Disbursement:  
 001 Payroll Service

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

601.40

Date M M / D D / Y Y Y Y  
 0 1 / 1 1 / 2 0 0 7

Transaction ID: H470219.E10406

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

29.52

52.48

82.00

**B. Full Name (Last, First, Middle Initial)**  
 Holiday Inn - Lincoln

Mailing Address

141 N. 9th Street

City State Zip Code  
 Lincoln NE 68508-

001

Purpose of Disbursement:  
 001 Meeting Room Rental

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1571.52

Date M M / D D / Y Y Y Y  
 0 1 / 2 6 / 2 0 0 7

Transaction ID: H470219.E10413

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

70.13

124.68

194.81

**C. Full Name (Last, First, Middle Initial)**  
 INSPRO, INC.

Mailing Address

100 E 6TH ST P.O. BOX 689

City State Zip Code  
 FREMONT NE 68025-5030

001

Purpose of Disbursement:  
 001 Insurance Premiums

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1127.06

Date M M / D D / Y Y Y Y  
 0 1 / 2 6 / 2 0 0 7

Transaction ID: H470219.E10414

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

50.76

90.24

141.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

150.41

267.40

417.81

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 29 / 33  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Nebraska Republican Party

**A. Full Name (Last, First, Middle Initial)**  
Lincoln Electric System

Mailing Address

PO BOX 80869

City	State	Zip Code
LINCOLN	NE	68501-

001

 Purpose of Disbursement:  
001 Utilities - Electric
Category/  
Type
 Activity or Event Identifier:  
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1376.71

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	6	/	2	0	0	7

Transaction ID: H470219.E10415

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

89.87

159.78

249.65

**B. Full Name (Last, First, Middle Initial)**  
Windstream

Mailing Address

PO Box 30348

City	State	Zip Code
Atlanta	GA	30348-

001

 Purpose of Disbursement:  
001 Utilities - Telephone
Category/  
Type
 Activity or Event Identifier:  
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2197.60

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	6	/	2	0	0	7

Transaction ID: H470219.E10416

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

193.60

344.18

537.78

**C. Full Name (Last, First, Middle Initial)**  
Nebraska U.C. Fund

Mailing Address

Department of Labor P.O. Box 94600

City	State	Zip Code
Lincoln	NE	68509-

001

 Purpose of Disbursement:  
001 Unemployment Taxes
Category/  
Type
 Activity or Event Identifier:  
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2512.76

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	0	/	2	0	0	7

Transaction ID: H470219.E10419

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

113.46

201.70

315.16

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

396.93

705.66

1102.59

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 30 / 33  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Nebraska Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 US Postmaster

Mailing Address

700 R Street

City State Zip Code

Lincoln

NE

68501-

001

Purpose of Disbursement:

001 Postage - Admin

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2693.47

Date

M M

/

D D

/

Y Y

Y Y

0 1

3 1

2 0

0 7

Transaction ID: H470219.E10421

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

3.69

6.55

10.24

**B. Full Name (Last, First, Middle Initial)**  
 Wells Fargo Card Services

Mailing Address

PO Box 6426

City State Zip Code

Carol Stream

IL

60197-

Purpose of Disbursement:

CREDIT CARD: SEE BELOW

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

705.72

Date

M M

/

D D

/

Y Y

Y Y

0 1

1 1

2 0

0 7

Transaction ID: H470219.E10441

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

37.56

66.76

104.32

**C. Full Name (Last, First, Middle Initial)**  
 Network Solutions

Mailing Address

PO BOX 7305

City State Zip Code

BALTIMORE

MD

21297-0525

001

Purpose of Disbursement:

MEMO 001 Web Site Hosting

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 2

[MEMO ITEM] MEMO 001 Web Site Hosting

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

11.95

Date

M M

/

D D

/

Y Y

Y Y

0 1

1 1

2 0

0 7

Transaction ID: H470219.E10444

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

4.30

7.65

11.95

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

41.25

73.31

114.56

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 31 / 33  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Nebraska Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 OFFICE MAX

Mailing Address

2301 O STREET

City State Zip Code  
 LINCOLN NE 68510-

001

Purpose of Disbursement:  
 MEMO 001 Office Supplies

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 2

[MEMO ITEM] MEMO 001 Office Supplies

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

30.56

Date 01 / 11 / 2007

Transaction ID: H470219.E10446

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

11.00

19.56

30.56

**B. Full Name (Last, First, Middle Initial)**  
 Target

Mailing Address

333 North 48th Street

City State Zip Code  
 Lincoln NE 68504-

001

Purpose of Disbursement:  
 MEMO 001 Office Supplies

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 2

[MEMO ITEM] MEMO 001 Office Supplies

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

36.86

Date 01 / 11 / 2007

Transaction ID: H470219.E10445

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

13.27

23.59

36.86

**C. Full Name (Last, First, Middle Initial)**  
 Verio

Mailing Address

8005 S Chester St Ste 200

City State Zip Code  
 Englewood CO 80112-3523

001

Purpose of Disbursement:  
 MEMO 001 Web Site Hosting

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 2

[MEMO ITEM] MEMO 001 Web Site Hosting

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

24.95

Date 01 / 11 / 2007

Transaction ID: H470219.E10447

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

8.98

15.97

24.95

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 32 / 33  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Nebraska Republican Party

**A. Full Name (Last, First, Middle Initial)**  
Don Aguirre

Mailing Address

5905 Bennet Rd

City

State

Zip Code

Roca

NE

68430-9679

Purpose of Disbursement:

REIMBURSEMENT: SEE BELOW

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1659.82

Date 01 / 26 / 2007

Transaction ID: H470219.E10451

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

31.79

56.51

88.30

**B. Full Name (Last, First, Middle Initial)**  
Sprint PCS

Mailing Address

P.O. Box 219554

City

State

Zip Code

Kansas City

MO

64121-

001

Purpose of Disbursement:

MEMO 001 Utilities - Cellular

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 2

**[MEMO ITEM]** MEMO 001 Utilities - Cellular

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

88.30

Date 01 / 26 / 2007

Transaction ID: H470219.E10452

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

31.79

56.51

88.30

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

31.79

56.51

88.30

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

969.65

1723.82

2693.47



Image# 27960065162

Form/Schedule: **F3XN**

Transaction ID: **C00032334**

All disbursements and expenditures for FUNDRAISING CONSULTING, TELEMARKETING - NEGOP and NEGOP FUNDRAISING MAIL EXPENSE were for fundraising purposes for the state party only; no federal candidate or federal officeholder was identified in any of these events. No disbursements for rent appear on the report as the Nebraska Republican Party owns the building from which the organization operates and therefore does not make rental payments. Non-federal funds were not used in connection with any federal election or federal election activity.

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